

Supplemental Application Data Sheet

Application number::

Not Yet Assigned 10/732,897

Filing Date:: Herewith 12/09/03

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: SUBSTITUTED PIPERAZINES

Attorney Docket Number:: 019934-003720US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 26

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United Kingdom

Status:: Full Capacity

Given Name:: Andrew

Middle Name:: M.K.

Family Name:: Pennell

Name Suffix::

City of Residence:: San Francisco

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 148 Hancock Street

City of Mailing Address:: San Francisco

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94114

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: James

Middle Name:: B.

Family Name:: Aggen

Name Suffix::

City of Residence:: Burlingame

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1311 California Drive

City of Mailing Address:: Burlingame

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94010

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Australia

Status:: Full Capacity

Given Name:: J.J.

Middle Name:: Kim

Family Name:: Wright

Name Suffix::

City of Residence:: Redwood City

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 720 Bair Road, Apt. 107

City of Mailing Address:: Redwood City

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94063

Applicant Authority Type:: Inventor

Primary Citizenship Country:: India

Status:: Full Capacity

Given Name:: Subhabrata

Middle Name::

Family Name:: Sen

Name Suffix::

City of Residence:: Sunnyvale

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 655 S. Fairoaks Avenue, #P-204

City of Mailing Address:: Sunnyvale

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94086

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Brian
Middle Name:: E.

Family Name:: McMaster

Name Suffix::

City of Residence:: Mountain View

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 120 Walker Drive

City of Mailing Address:: Mountain View

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94086 94043

Dairaghi

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Daniel
Middle Name:: Joseph

Name Suffix::

Family Name::

City of Residence:: Palo Alto

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 178 El Dorado Avenue

City of Mailing Address:: Palo Alto

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94306

Applicant Authority Type::

Primary Citizenship Country:: <u>US</u>

Status:: Full Capacity

Given Name:: <u>Valeri</u>

Middle Name:: <u>V.</u>

Family Name:: <u>Martichonok</u>

Name Suffix::

City of Residence:: San Francisco

State or Province of Residence:: <u>CA</u>

Country of Residence:: <u>US</u>

Street of Mailing Address:: 433 Font Boulevard

City of Mailing Address:: San Francisco

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94132

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation:: Representative Number:: Representative Name::

Inventor

Primary 30,223 William M. Smith Primary 37,369 William B. Kezer

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This application is a: CIP of: 10/460,752 06/11/03 and claims benefit of: Provisional 60/453,711 06/12/02

Assignee Information

Assignee Name:: ChemoCentryx, Inc.

Street of mailing address:: 1539 Industrial Road

City of mailing address:: San Carlos

State or Province of mailing address:: CA

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Country of mailing address::

US

Postal or Zip Code of mailing address:: 94070

Submitted by:

Signature	Chie B. Ry	Date	4-23.08
	0		
Printed Name	William B. Kezer	Registration Number	37,369

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